CALFRESH (CF) PROGRAM REQUEST FOR POLICY/REGULATION INTERPRETATION

INSTRUCTIONS: Complete items 1 - 10 on the form. Use a separate form for each policy interpretation request. If additional space is needed, please use the second page. Be sure to identify the additional discussion with the appropriate number and heading. Retain a copy of the CF 24 for your records.

- Questions from counties, including county Quality Control, must be submitted by the county CalFresh Coordinator and may be submitted
 directly to the CalFresh Policy analyst assigned responsibility for the county, with a copy directed to the appropriate CalFresh Policy unit
 manager.
- Questions from Administrative Law Judges may be submitted directly to the CalFresh Policy analyst assigned responsibility to the county where the hearing took place, with a copy of the form directed to the appropriate CalFresh Bureau unit manager.

١.	RESPONSE NEEDED DUE TO:	5.	DATE OF REQUEST:	NEED RESPONSE BY:
	✓ Policy/Regulation Interpretation	:	6/26/14	ASAP
	QC Fair Hearing	6.	COUNTY/ORGANIZATION: Humboldt County DH	HS-SS
	Other:	7.	suвлест: Voluntary Quit proces	S
2.	REQUESTOR NAME: Paris Bauer	8.	REFERENCES: (Include ACL/ACIN, court cases, etc. in references) NOTE: All requests must have a regulation cite(s) and/or a reference(s). Draft Voluntary Quit ACL dated 4-3-2012	
3.	PHONE NO.: (707) 268-9375			
4.	REGULATION CITE(S): 63-408.63			

9. QUESTION: (INCLUDE SCENARIO IF NEEDED FOR CLARITY):

An individual applies for CalFresh on 6/20/14 and an interview is completed. It is determined that the applicant voluntarily quit a full time job on 6/10/2014. Applicant does not meet any of the work registration exemptions and has no good cause for the quit. This is the applicant's first job quit penalty. (1) Is the applicant disqualified for a calendar month (6/20/14-6/30/14) or 30 days (6/20/14-7/19/14)? (2) Regulations at 63-407.6 state that an individual may apply at the end of the disqualification period but in this case where an interview has been completed, could the current application be denied with a new application immediately registered and approved with a beginning date of aid of the first day after the sanction ends?

10. REQUESTOR'S PROPOSED ANSWER:

- 1) Per draft Voluntary Quit ACL dated 4/3/12 (does not appear to have ever been published), applications with a voluntary quit shall be denied for 30, 60 or 180 days rather than using calendar months. This provides a simpler means for determining the length of the CalFresh denial since months vary in their duration and in most instances, the start date of the denial will not be the first of the month.
- 2) Per regulations at 63-408.63, when an application is filed in the final month of a CalFresh disqualification period, the CWD must use the same application for both the denial of CalFresh benefits in the remaining disqualification months and for certification of benefits for the subsequent month(s). Therefore since this is the last month of their 30-day disqualification CWDs should be able to approve a post-disqualification BDA using the same interview at which the job quit was discovered rather than forcing the client to reapply after the disqualification period ends.
- 11. STATE POLICY RESPONSE (CFPB USE ONLY):

ACL drafts are not valid policy references. However, the State concurs with the proposed responses. Per FNS guidance, when a voluntary quit is discovered prior to approval of the CalFresh application, the period of denial begins on the date of application and benefits shall be denied for 30, 90, or 180 days. In the example cited above, the period of denial would run for 30 days beginning June 20 and ending July 19. The county shall use the June 20 application for both the 30 day denial and for certification of benefits in July, provided the individual is otherwise eligible.

	FOR CDSS USE
DATE RECEIVED:	DATE RESPONDED TO COUNTY/ALJ:
	Tawny Macedo 7/11/2014

RESPONSE NEEDED DUE TO: Policy/Regulation Interpretation	5. DATE OF REQUEST:	NEED RESPONSE BY:	
☐ QC ☐ Fair Hearing ☐ Other:	6. COUNTY/ORGANIZATION: 7. SUBJECT:		
PHONE NO.:			
REGULATION CITE(S):			